

**PUBLIC HEALTH**

# Effectiveness of Alcohol Advertising Control Policies and Implications for Public Health Practice

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**ABSTRACT**

**Background:** The social and health consequences related to alcohol consumption and binge drinking, are on the rise among Canadian youth. Alcohol advertising is a significant factor that influences adolescent alcohol consumption, risky drinking, and alcohol-related illness and injury. In 1997, the Canadian federal government relaxed the process to approve alcohol advertisements. This change took away key deterrents that guarded against potentially irresponsible alcohol advertising.

**Purpose:** To investigate the effectiveness of existing alcohol advertising control policies and implications on public health and safety.

**Methods:** Ten keywords representing youth, alcohol, and advertising were used to search academic databases and the Internet. Semi-structured interviews were conducted with key informants from advertising, academic, and public health organizations.

**Results:** Three alcohol control policy areas emerged: alcohol self-regulation, restriction of alcohol promotion, and social responsibility messaging.

**Conclusions:** Long-term public health efforts should focus on supporting a complete restriction on all alcohol advertising. Total bans on alcohol advertising would be most effective in reducing the influence of alcohol promotion on public health and safety, particularly among youth. In the short-term, however, it is important that public health supports improvements to the current alcohol self-regulation policies in Canada and focus on counter-alcohol promotion measures. These efforts to target alcohol promotion would significantly ease the burden of illness and injury related to alcohol use; and in particular, risky drinking among youth.

**INTRODUCTION**

Alcohol is the most commonly used substance among Canadian youth.<sup>1</sup> In an Ontario study conducted in 2005, alcohol was reported as the number one drug used among all grades.<sup>2</sup> Youth engagement in heavy episodic drinking is associated with mortality, morbidity and high economic costs. More specifically, alcohol misuse is associated with numerous consequences, including: chronic disease, psychological issues, physical injury, violent crime, and suicide.<sup>3</sup> Over half of the students who frequently binge drink experience five or more alcohol related problems annually.<sup>4</sup>

Alcohol advertising exposure, especially among youth, is one of the many factors linked with increased consumption. One research report from the World Health Organization claimed that alcohol advertising "has been found to promote and reinforce perceptions of drinking as positive, glamorous and relatively risk-free ... exposure to repeated high levels of alcohol promotion inculcates pro-drinking attitudes and increases the likelihood of heavier drinking."<sup>5</sup> These researchers verify two ideas. Firstly, they suggest that the cumu-

lative influence of alcohol advertising shapes young people's perceptions of alcohol and drinking norms. Secondly, alcohol advertising predisposes minors to drinking well before the legal age of purchase.

Other studies further support these ideas, claiming that the risk of adolescent alcohol use and associated problems are significantly associated with alcohol advertising.<sup>6-13</sup> Despite the variance in methodology throughout these studies, several commonalities can be drawn. Exposure to or awareness of alcohol advertising has been shown to:

- increase favourable attitudes towards drinking among youth, and a greater intention to drink as adults;
- lead to heavier or more frequent drinking among young adults;
- increase the risk of adolescent alcohol use and associated consequences.

One way to protect young people from the effects of alcohol advertising, or at least reduce these effects, is to implement effective alcohol promotion control policies. There are numerous alcohol advertising control policies used with varying

degrees of effectiveness. The purpose of this report is to critically examine common alcohol advertising policies used, while focusing on the Canadian context. The evidence gathered from the literature review and key informant interviews form the basis of the recommendations provided. Additionally, the information focuses on implications for public health efforts to reduce the health burdens associated with adolescent alcohol use and binge drinking.

## METHODS AND MATERIALS

The search for relevant literature included print, electronic, public and unpublished materials from library databases as well as the Internet. With regards to the former, the following databases were used:

- Cambridge Scientific Abstracts (which include Medline, PsychINFO, and Sociological Abstracts);
- Web of Science;
- ProQuest;
- Factiva.

These databases search a vast number of medical, psychology, sociology, media and policy journals. Ten keywords reflecting alcohol, youth, and policy were used. English language articles were selected. The Internet search engines, Google and Yahoo, were searched for relevant online articles using the same keywords as in the library search strategy in a variety of combinations.

The library search strategy generated 1,434 citations in total using the selected keywords. Of these, nine key articles were identified. The Internet search generated hundreds of citations, out of which 25 articles were deemed appropriate. In total, 34 articles from the literature review were used to inform this article.

A list of key informants was generated with input from a voluntary advisory committee to the Association to Reduce Alcohol Promotion in Ontario (ARAPO). Two major advertising standards agencies were recruited for interviews: the Alcohol and Gaming Commission of Ontario (AGCO) and Advertising Standards Canada (ASC). Additionally, other key individuals (e.g., public health professionals, researchers in law and psychology) were recruited. These informants were involved in substance abuse issues, particularly interested in alcohol and alcohol advertising. They were asked to share their experiences and opinions on the effects that alcohol promotion has on public health and safety, as well as their opinions on the current guidelines that regulate the alcohol advertising industry. Interviews were semi-structured and took place either over the telephone or face-to-face. Informed consent was collected prior to each interview.

## RESULTS

Three major categories of alcohol promotion control policies were found in the literature review and interviews: industry self-regulation, restriction of alcohol advertisements, and social responsibility messaging.

## Industry Self-Regulation

Before June 1995, the Canadian federal government required mandatory pre-clearance of all alcohol advertisements through the Canadian Radio-television Telecommunications Commission (CRTC). All advertisements were required to meet the CRTC's Code for Broadcast Advertising of Alcoholic Beverages before public distribution. In 1997, the CRTC disbanded the mandatory pre-clearance process of alcohol advertisements. Since then, efforts to control alcohol advertisements have been left to the provinces, broadcasters, and the industry themselves on a voluntary basis.<sup>14</sup>

The literature review identified problems in the regulation of all sources of alcohol advertisements, established alcohol advertisement control guidelines, and the alcohol advertisement complaint process. These problems demonstrated the limited effectiveness of self-regulation and the need for improvement of current regulations on alcohol advertising in Canada.

The first limitation of self-regulation relates to the difficulty of controlling all advertising types due to the myriad of sources. Alcohol marketing enjoys free rein throughout the world, flooding traditional media such as broadcast, print, and outdoor advertising.<sup>15</sup> International broadcast stations, many of which young Canadians have access to through cable and satellite services, do not have to meet CRTC's code or province-specific codes and regulations. Many countries (between 28% and 57%, depending on the media) have no limitations or regulations on alcohol advertising.<sup>16</sup> As a result, Canadian adolescents are exposed to thousands of uncontrolled alcohol advertisements. It is important all types of advertising be controlled, including: sponsorship of youth events; point of purchase advertising; product placement in film; campus marketing; and the Internet.<sup>17</sup>

International trade agreements further challenge regulation of alcohol advertising. Researchers have noted various circumstances in which trade agreement provisions were used to override existing advertising restrictions or prevent new restrictions from being introduced.<sup>18</sup> Governments have also struggled to justify their regulations to trade panels. Efforts to target alcohol advertising must take a global-approach given that alcohol advertising is an international industry that does not recognize political borders.<sup>19</sup>

Industry self-regulation is also hindered by non-specific guidelines. Alcohol advertisements often appeal to youth despite guidelines. For example, a new category of alcoholic beverages, marketed as "alco-pops", have been found to be especially popular among the younger audience, even to individuals as young as 14 years old.<sup>20,21</sup> Dr. Krank adds that youth are attracted to party scenes in alcohol advertisements regardless of the age of the models used (M. Krank, personal communication, August 9, 2005). Dr. Solomon recommends that the guidelines be rewritten in a clear and concrete manner to aid in the review and complaint process of alcohol advertisements (R. Solomon, personal communication, August 15, 2005).

The complaint system is the third major limitation of industry self-regulation. Submission of complaints against alcohol

advertisements by advertising standards agencies (e.g. ASC) is one means for the enforcement of regulations. Organizations have different mandates and different sets of codes that produce confusion and difficulty when trying to complain about an inappropriate advertisement.

Dr. Solomon, a professor and researcher of law, admitted finding the complaint process, “very frustrating and not particularly effective”. He adds: “The reason why it is ineffective is the vast majority of the public have no idea what the law is” (R. Solomon, personal communication, August 15, 2005). Solomon also states that public education regarding Canadian advertising laws and the complaint process would impact on health status in a positive way.

Complaints that are submitted are normally too late to prevent public harm. Once the advertisement is in public view, “the damage has already been done – the ad is out there, the public has seen it and has reacted to it”, concludes Ms. Sanagan (P. Sanagan, personal communication, August 8, 2005). The current complaint system in Canada can be seen as a band-aid solution and its reliability to prevent the occurrence of inappropriate alcohol advertising is questionable.

### **Restriction of Alcohol Advertisements**

In reviewing the literature, three types of alcohol promotion restriction policies were found: restriction of alcohol advertising placement; partial restriction of alcohol advertising; and total restriction of alcohol advertising.

Throughout Canada guidelines exist to limit or prohibit the placement of alcohol advertisements near or in areas frequented by minors, including: schools, amusement parks, movie theatres, and concerts. Due to the regulatory framework provided there are limitations in how these guidelines are enforced. Researchers are concerned about “the extent to which these restrictions and guidelines are enforced, in practice, remains a matter of grave concern among those working in the fields of public health and safety”.<sup>22</sup>

In contrast, the United States employ regulations that do not allow placement of alcohol advertisements in places where the audience is comprised of greater than 30 percent minors, referred as the 30 percent cap. After the first seven months of the 30 percent cap on the placement of alcohol advertisement went into effect, youth were more exposed to 73 brands of alcohol in 10,000 magazines than the intended audience of adults aged 21 years and over.<sup>23</sup> This scenario was also true for six popular alcohol brands on national television. Based on this research, a new standard is recommended: restrict alcohol advertisements among audiences containing 15 percent minors or greater.<sup>24</sup>

Partial restriction of alcohol advertising includes banning one or two methods to advertise alcohol and or alcohol products. Tobacco advertising research in the United States has found that since the time tobacco advertisements were banned from television and radio, many tobacco companies turned to event sponsorship, stadium billboard space, and merchandising as a means of product promotion.<sup>25</sup> This shift has also been seen in alcohol advertising. As these examples demonstrate,

partial advertising restrictions do not work because advertising migrates to an alternate medium. A ban in one or two media will result in the shift toward different, available media.<sup>26</sup> Therefore, if alcohol restriction policies are used, a total ban of alcohol advertising must be employed.

Total restriction of alcohol advertising involves the complete ban of all types of alcohol advertising. A total ban of alcohol advertising usually refers to, but not limited to, traditional media; including, print advertisements, advertisements on radio, television advertisements, and alcohol sponsorship. In the past, there has been variable evidence to support complete alcohol advertising restrictions. Many early studies, including studies of the alcohol advertising bans in British Columbia and Saskatchewan, were considered to have weak study designs and showed little support for their findings. More recent studies, however, have used stronger study designs (e.g., larger study samples, and utilizing longitudinal data), which suggest that advertising bans do in fact decrease alcohol consumption.<sup>27</sup>

Furthermore, researchers suggest that advertising restrictions reduce alcohol usage and its negative effects, such as drinking and driving, because alcohol advertising bans affect industry competition.<sup>28</sup> When industry competition exists through advertising, the prices of alcohol products are comparatively low as a result of competition. In contrast, implementing an alcohol advertising ban eliminates industry competition. It is proposed as competition is eliminated the cost of alcohol will increase over time to ultimately deter individuals, particularly youth, from purchasing alcohol.<sup>29</sup>

Banning alcohol advertisements may bring opposition and counter-arguments. For example, one could argue that banning would restrict the rights of the manufacturer to advertise its product. However, researchers found that if “a ban were placed on all radio and TV alcohol advertising, 2,000 to 3,000 lives would be saved each year (in the United States alone).”<sup>30</sup> As Dr. Solomon points out, alcohol is the only intoxicating substance that we allow to be mass marketed and mass advertised in our society. This needs to change, concludes Solomon (R. Solomon, personal communication, August 15, 2005), and “we would all be better served if there were more limits to the (alcohol) industries’ right to advertise.” Aside from opposition by the alcohol industry, a few broadcasters, and heavy drinkers, there is virtually no support for alcohol advertisements in the media.<sup>31,32</sup>

### **Social Responsibility Messaging**

There are three main types of social responsibility messaging that could be used to help counter messaging in alcohol advertisements: health warning labels/signs, Public Service Announcements (PSAs), and alcohol advertising media literacy. These types of communication do not control the alcohol advertisement message per se, but rather counteract the pro-alcohol messaging by increasing the public’s awareness of the potential harmful effects of alcohol use.

Alcohol health warning labels or warning signs is messaging displayed on alcohol products, on alcohol advertisements, and in establishments serving or selling alcohol. Warning labels

specifically communicate the potential harm or consequences of using alcohol products. In Canada, some alcohol advertisers include cautionary statements on advertisements and beverages, while others may include “moderation messages”, such as promoting responsible drinking or drinking in moderation. Health warning labels, for the most part, are used on a voluntary basis. There is some legislation occurring in Canada surrounding warning labels and signs. For example, signage warning the public about the potential effects of alcohol during pregnancy is mandatory in Ontario where alcohol products are sold.<sup>33</sup>

In a recent study, 70% of Ontario respondents supported the statement that, “alcoholic beverages should have warning labels with regard to health hazards.”<sup>34</sup> Even though there is strong public support for policies around mandatory use of alcohol health warning labels, there is limited research on the effectiveness of health warning labels on alcohol products and advertisements. From tobacco research, health warning labels can be effective in changing attitudes and behaviours if they:<sup>35</sup>

- contain simple, straight-forward messaging suitable for low-literacy individuals;
- contain large fonts and graphics;
- are believable; and
- are comprehensible (e.g., no medical jargon).

Policies to require the use of alcohol health warning labels and signs may be a feasible option to reduce or counter the effects of alcohol promotion. However, more research needs to be done in this area to determine how to use alcohol health warning messaging most effectively, especially among youth audiences.

Public Service Announcements are effective in raising awareness about the potential harms that could result from risky alcohol use and provide support for policy initiatives surrounding alcohol use.<sup>36</sup> There is no set guidelines in Canada of how many PSAs should be produced each year or how many should be produced for every new alcohol advertisement. The guidelines to regulate the number of PSAs produced in Canada are not required of the alcohol advertising standards agencies, such as Alcohol Gaming Commission of Ontario for Ontario (AGCO, in response to electronic survey, September 9, 2005). Currently, the majority of PSAs produced in Canada are done so by government funded public health groups. As a result, the number of PSAs produced in Canada is irregular from year to year. Also, effectiveness of media campaigns on risky drinking shows limited effectiveness. However, the following was proposed as possible ways to increase effectiveness:

- link messaging with direct community action;
- use accurate information;
- use scare tactics only with low awareness audiences;
- establish a well defined target group;
- conduct formative evaluations to inform the campaign messaging and materials; and
- address knowledge and beliefs that are barriers to the desired behaviour.<sup>37</sup>

Media literacy training with youth, focused on the harmful effects of alcohol advertising, is another method used to com-

bat the messages and the preferred lifestyles dictated by the alcohol industry. Education should contain components to increase youth awareness about the issue, allow for meaningful analysis and reflection of the alcohol messages, and finally enable youth to take action.<sup>38</sup>

When youth are media literate about the influence of alcohol advertising, they are more prepared to make informed decisions about personal consumption of alcohol and more motivated to join efforts to reduce the influence of alcohol advertising on themselves and peers. The Marin Institute, an alcohol industry watchdog, explains that, “youth-led environmental prevention benefits young people’s understanding of how they are targeted by alcohol advertising and marketing ... and how drinking is perceived among their peers.”<sup>39</sup> Public health agencies and community groups are well situated to provide adequate support and encouragement for youth to be involved in prevention efforts.

## DISCUSSION

Alcohol advertising control policies are not as effective as they should and could be in Canada. This perspective is evident from the literature review and key informant interviews seen in this study.

From this review, one could argue that there is sufficient research to support the application of total alcohol advertising bans.<sup>40–42</sup> As a result, complete restriction of alcohol promotion should be a top priority. This is true especially after one considers the harmful effects alcohol advertising has on youth’s choices towards alcohol consumption<sup>43</sup> and the social and medical burden of risky drinking.<sup>44</sup> Implementing a complete ban would be ambitious and long term in nature, recognizing the current political context in Canada. In the interim, however, there are a number of approaches that can be used to minimize the negative impact alcohol advertising has on public health and safety.

Improving the current alcohol control policies in Canada is one approach. The key informants in this review identified numerous limitations of the current self-regulatory system, including: the lack of regulation of all forms of advertising, unclear alcohol advertising guidelines, and a complaint process eliminating advertisements only after impact has been felt. Improving these limitations are notable activities, however, if improvements are made it is important to ascertain whether or not these efforts are achieving better control of alcohol advertising and reducing the burden associated with alcohol use. For example, if improvements were made to the guidelines surrounding the appeal of alcohol advertisements among youth, evaluations need to be conducted on whether appeal and impact of alcohol advertisements is reduced over time. It is difficult to establish casual inferences in this area of study; however, strong associations can be seen through cross-sectional studies or longitudinal studies.

Additionally, the role of wider social forces, such as class, income, and education must be considered. The studies examining total alcohol advertising bans did not focus on specific populations, such as low-income or low-education groups.

Studies are beginning to show that low socio-economic groups experience higher than average adverse consequences associated with alcohol use. For example, Canadian Aboriginal youth are two to six times more likely to experience alcohol-related consequences than non-Aboriginal youth.<sup>45</sup> Additionally, studies are showing exposure to alcohol advertising is often higher in low socio-economic populations.<sup>46</sup> Further investigation into the wider social, economic and cultural reasons for this disproportionate burden of illness are essential. Based on the results of such studies, there may be evidence for a total ban of alcohol advertising in areas containing high percentages of individuals living in low socio-economic situations. This approach might be especially advantageous since a complete advertising ban across the entire population would be an expensive task and difficult to enforce.

There are two avenues in which public health groups can respond to the current state of alcohol advertising in Canada. First, groups can mobilize community action. Public health agencies and coalitions are uniquely positioned to engage and mobilize politicians, community members, volunteers, schools, and others to minimize the negative effects of alcohol advertising. Public health groups can provide the evidence-based research to politicians and advise them in taking action on alcohol advertising control policies. Also, education efforts should be focused on community members, including youth, to inform about the current alcohol advertising policies. As seen by this review, there is a need for the general public to be more aware of alcohol advertising policies, the limitations of these policies, and how to respond. The following are some activities that the public can engage in to support community action:

- Write (or support others in writing) letters to newspapers about alcohol advertising and its impact on youth and risky drinking.
- Write (or support others in writing) complaint letters to the industry and alcohol advertising agencies about questionable advertisements.
- Encourage enforcement of current alcohol advertising policies (e.g. resist sponsorship at family community events).

A second response to alcohol advertising from a public health perspective is to increase the number of counter-alcohol advertising messaging. Health warning labels on alcohol products/promotion emerged as a key mechanism in reducing the effects alcohol advertising has on youth's health and safety. Large corporations sometimes use what is good in our culture to create the image of social conscience.<sup>47</sup> However, for corporations like these, including alcohol companies, the greatest concern is the profit margin. As a result, health/responsibility messages produced by the alcohol industry should not be left unmonitored. Public health is best positioned to advise the industry on what exactly is responsible drinking and appropriate health warning labels. From this review, it is evident that more research is needed to establish the effectiveness of health warning labels on alcohol products and promotion. Focus groups or surveys should be conducted with the public on an ongoing basis to assess how best to use "responsible drinking" messages.

From this review, Public Service Announcements (PSAs) were found to be a second type of counter-alcohol advertising mechanism. The development of PSAs is heavily contingent on public health pressure for need of these advertisements. More PSAs about risky drinking need to come from public health, as there are increasingly more alcohol advertisements as compared to PSAs in Canada.<sup>48</sup> Moreover, from this review it was evident that more research is needed to identify the most effective techniques for PSAs and to detect the impact of these campaigns.

Finally, alcohol advertising media literacy could be a valuable component in alcohol-related programming for adolescents. Media literacy focusing on alcohol advertising would help to de-mystify and de-glamorize the positive drinking messages produced from the alcohol industry. Media literacy about alcohol promotion would provide the opportunity for youth to gain greater control over their exposure to alcohol advertisements. Also, media literacy would allow youth to make better personal decisions about alcohol use; thus, decreasing the risk of alcohol associated consequences.

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## REFERENCES

1. Health Canada. (2001). Preventing substance use problems among young people: A compendium of best practices. Ottawa, ON: Author. Retrieved September, 2005 from [http://www.hc-sc.gc.ca/ahc-asc/alt\\_formats/hecs-sesc/pdf/pubs/drugs-drogues/prevent/young-jeune\\_e.pdf](http://www.hc-sc.gc.ca/ahc-asc/alt_formats/hecs-sesc/pdf/pubs/drugs-drogues/prevent/young-jeune_e.pdf).
2. Adlaf, E. M., Paglia-Boak, A. (2005). Drug use among Ontario students 1977-2005. Centre for Addiction and Mental Health. Toronto, ON: Author.
3. Babor, T., Caetano, R., Casswell, S., et al. (2003). Alcohol: No Ordinary Commodity - Research and Public Policy. Oxford, UK: World Health Organization, 64.
4. Wechsler, H., Nelson, T. F., Lee, J. E., et al. (2003). Perception and reality: A national evaluation of social norms marketing interventions to reduce college students' heavy alcohol use. *Journal of Studies on Alcohol*, 64(4), 484-494.
5. Babor, T., Caetano, R., Casswell, S., et al. (2003). Alcohol: No Ordinary Commodity - Research and Public Policy. Oxford, UK: World Health Organization, 174-183.
6. Snyder, L.B., Fleming Milici, F., Slater, M., et al. (2006). Effects of Alcohol Advertising Exposure on Drinking Among Youth. *Archives of Paediatric and Adolescent Medicine*. 160, 18-24.
7. Stacy, A., Zogg, J., Unger, J.B., et al. (2004). Exposure to Televised Alcohol Ads and Subsequent Adolescent Alcohol Use. *American Journal of Health Behaviour*. 28(6), 498-509.
8. Unger, J., Schuster, D., Zogg, J., et al. (2003). Alcohol advertising exposure and adolescent alcohol use: A comparison of exposure measures. *Addiction Research and Theory*, 11(3), 177-193.
9. Collins R., Schell, T., Ellickson P., et al. (2003). Predictors of beer advertising awareness among eighth graders. *Addiction*, 98, 1297-1306.
10. Saffer, H. (1997). Alcohol advertising and motor vehicle fatalities. *The Review of Economics and Statistics*, 79(3), 431-442.
11. Grube, J.W. (1995). Television alcohol portrayals, alcohol advertising and alcohol

- expectancies among children and adolescents. In S.E. Martin (ed.), *The Effects of the Mass Media on the Use and Abuse of Alcohol*. (pp. 105-121). United States: US Department of Health and Human Sciences.
12. Wyllie, A., Zhang, J., Casswell, S. (1998). Responses to televised alcohol advertisements associated with drinking behaviour of 10-17 year olds. *Addiction*, 93(3), 361-371.
  13. Stacy, A.W., Zogg, J., Unger, J.B., et al. (2004). Exposure to televised alcohol ads and subsequent adolescent alcohol use. *American Journal of Health Behavior*. 23(6), 498-509.
  14. Canadian Radio-Television Telecommunications Commission (CRTC). (1996). New regulatory framework governing the broadcast of alcoholic beverage advertising. Ontario, Canada: CRTC. Retrieved August, 2005 from [www.crtc.gc.ca/archive/ENG/Notices/1996/PB96-108.HTM](http://www.crtc.gc.ca/archive/ENG/Notices/1996/PB96-108.HTM)
  15. Jernigan, D., Mosher, J. (2005). Editors' Introduction: Alcohol Marketing and Youth – Public Health Perspectives (Editorial). *Journal of Public Health Policy*, 26, 287-291.
  16. World Health Organization (WHO). (2004). *Global Status Report: Alcohol Policy*. Geneva, Switzerland: World Health Organization. Retrieved from August, 2005, from [www.who.int/substance\\_abuse/publications/en/Alcohol%20Policy%20Report.pdf](http://www.who.int/substance_abuse/publications/en/Alcohol%20Policy%20Report.pdf).
  17. Kessler, D. (2005). Alcohol Marketing and Youth: The Challenge for Public Health (Commentary). *Journal of Public Health Policy*, 26, 292-295.
  18. Gould, E. (2005). Trade treaties and alcohol advertising policy. *Journal of Public Health Policy*, 26, 359-376.
  19. Caswell, S., Maxwell, A. (2005). Regulation of alcohol marketing: A global view. *Journal of Public Health Policy*, 26, 343-358.
  20. Johnston, L. D., O'Malley, P. M., Bachman, J. G., et al. (2004). Overall teen drug use continues gradual decline, but use of inhalants rises. MI, United States: University of Michigan News and Information Services. Retrieved September, 2005, from [www.monitoringthefuture.org/data/04data.html#2004data-drugs](http://www.monitoringthefuture.org/data/04data.html#2004data-drugs).
  21. Hughes, K., MacKintosh, A.M., Hastings, G., et al. (1997). Young people, alcohol, and designer drinks: Quantitative and qualitative study. *British Medical Journal*, 314(7078), 141-418.
  22. Hovius, B., Solomon, R. (2001). *Alcohol Advertising: A Legal Primer*. 2nd Edition. Toronto, Ontario: Association to Reduce Alcohol Promotion in Ontario, 34.
  23. Center for Alcohol Marketing and Youth (CAMY). (July 2005). *Striking a balance: Protecting youth from overexposure to alcohol ads and allowing alcohol companies to reach the adult market*. Washington D.C., CAMY. Retrieved August, 2005, from [www.camy.org/research/striking/](http://www.camy.org/research/striking/)
  24. Hass, A. (2005). *Reducing alcohol ads kids see won't cost industry adult market*. Washington D.C., United States: Centre on Alcohol Marketing and Youth. Retrieved August, 2005, from [www.camy.org](http://www.camy.org)
  25. Jernigan, D. (2003). *Alcohol marketing and youth: Monitoring the effectiveness of U.S. alcohol industry's self-regulation*. London, UK: The Globe. Retrieved August, 2005, from [www.ias.org.uk/publications/theglobe/03issue1/globe0301\\_p8.html](http://www.ias.org.uk/publications/theglobe/03issue1/globe0301_p8.html)
  26. Saffer, H. (2002). Alcohol advertising and youth. *Journal of Studies on Alcohol*. Supplement 14, 173-181.
  27. Saffer, H., Dave, D. (2002). Alcohol consumption and alcohol advertising bands. *Applied Economics*, 30, 1325-1334.
  28. Tremblay, V.J., Okuyama, K. (2001). Advertising restrictions, competition, and alcohol consumption. *Contemporary Economic Policy*, 19(3), 313-321.
  29. Hastings, G., Anderson, S., Cooke, E. et al. (2005). Alcohol Marketing and Young People's Drinking: A Review of the Research. *Journal of Public Health Policy*, 26, 296-311.
  30. Saffer, H. (1997). Alcohol advertising and motor vehicle fatalities. *The Review of Economics and Statistics*, 79(3), 431-442.
  31. Giesbrecht, N., Ialomiteanu, A., Anglin, L. (2005). Drinking patterns and perspectives on alcohol policy: Results from two Ontario Surveys. *Alcohol & Alcoholism*, 40(2), 132-139.
  32. Hacker, G.A. (1998). Liquor advertisements on television: Just say no. *Journal of Public Policy & Marketing*, 17(1), 139-142.
  33. Alcohol and Gaming Commission of Ontario (AGCO). (2005). *Mandatory signage regarding consumption of alcohol during pregnancy*. Ontario, Canada: AGCO. Retrieved September, 2005, from [www.agco.on.ca/en/b.alcohol/warningsign.html](http://www.agco.on.ca/en/b.alcohol/warningsign.html)
  34. Giesbrecht, N., Ialomiteanu, A., Anglin, L. (2005). Drinking patterns and perspectives on alcohol policy: Results from two Ontario Surveys. *Alcohol & Alcoholism*, 40(2), 132-139.
  35. Fox, R.J., Drugman, D.M., Fletcher, J.E., et al. (1998). Adolescents' attention to beer and cigarette print ads and associated product warnings. *Journal of Advertising*, 27(3), 57-68.
  36. Saffer, H. (2002). Alcohol advertising and youth. *Journal of Studies on Alcohol*. Supplement 14, 173-181.
  37. Miller Neighbour & Associates. (2005). *Final report on a literature review to support a province-wide communication/media campaign on dangerous drinking by youth ages 15 to 18*. Ontario, Canada: Parent Action on Drugs. Retrieved September, 2005, from [www.apolnet.ca/resources/pubs/YAMMLitSearchReport.pdf](http://www.apolnet.ca/resources/pubs/YAMMLitSearchReport.pdf).
  38. Bergsma, L.J. (2004). Empowerment education: The link between media literacy and health education. *American Behavioral Scientist*, 48(2), 152-164.
  39. Marin Institute. (2005). *Take Action*. California, USA. Retrieved August, 2005 from [www.marininstitute.org/take\\_action/index.htm](http://www.marininstitute.org/take_action/index.htm)
  40. Saffer, H., Dave, D. (2002). Alcohol consumption and alcohol advertising bands. *Applied Economics*, 30, 1325-1334.
  41. Tremblay, V.J., Okuyama, K. (2001). Advertising restrictions, competition, and alcohol consumption. *Contemporary Economic Policy*, 19(3), 313-321.
  42. Hastings, G., Anderson, S., Cooke, E. et al. (2005). Alcohol Marketing and Young People's Drinking: A Review of the Research. *Journal of Public Health Policy*, 26, 296-311.
  43. Snyder, L.B., Fleming Milici, F., Slater, M., et al. (2006). Effects of Alcohol Advertising Exposure on Drinking Among Youth. *Archives of Paediatric and Adolescent Medicine*. 160, 18-24.
  44. Babor, T., Caetano, R., Casswell, S., et al. (2003). *Alcohol: No Ordinary Commodity - Research and Public Policy*. Oxford, UK: World Health Organization, 64.
  45. Raphael, D. (2004). *Social determinants of health: Canadian perspectives*. Toronto, ON: Canadian Scholars' Press, Inc., 270.
  46. Center on Alcohol Marketing and Youth (CAMY). (2006). *Exposure of African-American youth to alcohol advertising, 2003 to 2004*. Washington D.C., CAMY. Retrieved August, 2006, from <http://camy.org/research/afam0606/>
  47. Klein, N. (2000). *No Logo: Taking aim at the brand bullies*. Toronto, Canada: Vintage Canada, A Division of Random House of Canada Ltd., 335.
  48. Canadian Radio-Television Telecommunications Commission (CRTC). (2005). *Broadcasting Policy Monitoring Report 2005: Radio, Television, Broadcasting distribution, Social issues*. Internet. Ontario, Canada: CRTC. Retrieved August, 2005, from [www.crtc.gc.ca/eng/publications/reports/PolicyMonitoring/2005/bpmp2005.htm#vdl](http://www.crtc.gc.ca/eng/publications/reports/PolicyMonitoring/2005/bpmp2005.htm#vdl).

### Author Biographies

**Rebecca Heipel-Fortin** is the Program Coordinator for APARO. In this position, she works to promote public health and safety through education, policy and community action to reduce the effects of alcohol promotion, especially among youth. She has an Honours Bachelor of Science degree in Health Studies from the University of Waterloo.

**Benjamin Rempel** is the Manager of Alcohol Projects at the Ontario Public Health Association. His main areas of work consist of increasing awareness of alcohol promotion and the effects on youth consumption along with promoting the effectiveness of alcohol policies in Ontario. He is a graduate of Laurentian University with an Honours degree in Health Promotion.